Effective December 8, 2004										10/563315			
	CLAIMS AS FILED - PART I SMALL								NTITY		OTHE	R THAN	
-	S MATIONAL	L STAGE FEES	<del></del>	lumn 1)	r	(Column 2)	7	TYPE	<u> </u>	Of	SMALL	ENTITY	
H						4	RATE	FEE	_	RATE	FEE		
B/	SIC FEE		SMALL ENT. = \$ 150		RGE ENT. = \$ 300		BASIC FEE	_ [	OF	BASIC FEE	34		
EX	AMINATION F	EE		Satisfies PCT Article 33(1)- (4) = \$50 / \$100		other situations = \$ 100 / \$ 200		EXAM. FEE			EXAM. FEE	20	
SEARCH FEE			ALL other	U.S. is ISA = \$50 / \$100 ALL other countries = \$200 / \$400		other situations = \$ 250 / \$ 500		SEARCH FEE			SEARCH FEE	40	
FE	E FOR EXTRA	_   m	minus 100 =		/ 50 =	]	X \$ 125 =		7	X \$ 250 =	1-1-00		
то	TAL CHARGE	117	1 7 minus 20 = .			1	X \$ 25 =	1	OR	X \$ 50 =	1		
IND	EPENDENT C	13	minus 3 =	*		1	X \$ 100 =		OR	X \$ 200 =			
MU	LTIPLE DEPEN	NDENT CLAIM PE	RESENT				1	+ \$ 180 =	1	OR	+ \$ 360 =		
• 11	If the difference in column 1 is less than zero, enter "0" in column 2									OR	TOTAL		
<del></del>	<u> </u>	(Column 1) CLAIMS REMAINING	-	(Colum	n 2) ST	(Column 3)	ı i	SMALL	ADDI-	OR	OTHER SMALL (	ENTITY	
AMENDMENT A		REMAINING AFTER AMENDMENT		NUMBI PREVIOU PAID F	ER JSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X \$ 25 =		OR	X \$ 50 =		
	Independent	•	Minus	***		=	l	X \$ 100 =		OR	X \$ 200 =		
	FIRST PRES	ENTATION OF N	IULTIPLE DE	LTIPLE DEPENDENT CLAIM			ı	+ \$ 180 =		OR	+ \$ 360 =		
							L	TOTAL ADDIT. FEE		OR	TOTAL ADDIT.		
								ree I		2	FEE		
٠,	·	(Column 1)		(Column		(Column 3)	r						
<b>?</b>		REMAINING AFTER AMENDMENT		PREVIOUS PAID FO	R SLY	PRESENT EXTRA		RATE	ADDI- TIONAL - FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X \$ 25 =		OR	X \$ 50 =		
	Independent	•	Minus	***		=-		X \$ 100 =		OR	X \$ 200 =		
ı	FIRST PRESE	ENTATION OF M	ULTIPLE DEP	ENDENT CL	AIM		Γ	+ \$ 180 =		OR	+ \$ 360 =		
TOTAL ADDIT. FEE										OR	TOTAL ADDIT. FEE		
						•							
	the "Highest Nun	nn 1 is less than the nber Previously Paid	For IN THIS S	PACE is less th	an '20',	enter "20".							
W T	the "Highest Num he "Highest Num	nber Previously Paid ber Previously Paid	For IN THIS SI For (Total or Ind	PACE is less th lependent) is th	an '3', e e highe	enter "3". est number found in	the a	sppropriate box i	n column 1.				

FORM PTO-875 (Rev. 02/2005)

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